

18/28412

Vonda M. Wason
Paralegal Specialist

S.N. 09/284,152

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							FILING DATE	
CLAIMS							APPLICANT(S)	
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	
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TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								

04,06,06

CLAIMS		IND.		DEP.		IND.		DEP.		IND.		DEP.	
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TOTAL IND.													
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TOTAL CLAIMS													

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	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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102				2		
103				2		
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TOTAL DEP.						
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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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